



\$ 1745
CC

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/446,641
	Filing Date	December 22, 1999
	First Named Inventor	T. Hatazawa et al.
	Group Art Unit	1745
	Examiner Name	Tracy Mae Dove
Total Number of Pages in This Submission	Attorney Docket Number	09793822-0111

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Response to August 20, 2003 Office Action; Terminal Disclaimer and Declaration Under 37 C.F.R. § 1.132.						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	15	-	20	0	<input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00	\$0
INDEPENDENT CLAIMS	2	-	3	0	<input type="checkbox"/> x \$42.00 <input checked="" type="checkbox"/> x \$86.00	\$0
	APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME	\$0
	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0
<input checked="" type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated <u>August 20, 2003</u> by <u>3</u> month(s) for a fee of <u>\$950.00</u> so that the period for response is extended to <u>February 20, 2004</u> under 37 C.F.R. § 1.321.						
<input checked="" type="checkbox"/> The amount of <u>\$110.00</u> for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed check.						
<input type="checkbox"/> The amount of \$_____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check.						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of <u>\$1060.00</u> covers the extension fee.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
14. <input checked="" type="checkbox"/> Customer No. 26263	
Dated: <u>February 20, 2004</u>	David Rozenblat, (Registration No. 47,044)

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: <u>February 20, 2004</u>	 Roxanne M. Swartz